

HAWAII STATE ETHICS COMMISSION

1001 BISHOP STREET, HONOLULU, HAWAII 96813 or P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: (808) 587-0460 FAX: (808) 587-0470 email: etnics@hawaiiethics.org

Web site: www.hawaii.gov/ethics

NOTE: This is a public document.

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LOBBYIST REGISTRATION FORM THICS COMMISSION (Type or Print Clearly)

(Type or Print Clearly)					
PART LOBBYIST					
NAME (Last)	(First)	(Middle)	TELEPHONE		
IDA	GLENN		808-295-1280		
MAILING ADDRESS (Street)			FAX 808-528-2629		
1109 BETHEL STREET	LOWER LEVEL		EMAIL GLENNIDA@GMAIL.COM		
(City)	(State)		(Zip Code)		
HONOLULU	HAWAII		96813		
EMPLOYING ORGANIZATION (Fill	n only if you are employed by a business er	itity which has been retained t	to lobby) TELEPHONE		
PLUMBERS & FITTERS LOCAL UNION 675			808-536-5454		
MAILING ADDRESS (Street)			FAX 808-528-2629		
1109 BETHEL STREET LOWER LEVEL		EMAIL RCASTANARES@HILOCAL675.COM			
(City)	(State)		(Zip Code)		
HONOLULU	HAWAII		96813		

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU L	TELEPHONE	
PLUMBERS & FITTERS L	808-536-5454 FAX 808-528-2629	
MAILING ADDRESS (Street)		
1109 BETHEL STREET LO	EMAIL RCASTANARES@HILOCAL675.COM	
(City)	(State)	(Zip Code)
HONOLULU	HAWAII	96813
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE
REGINALD CASTANARES		808-536-5454
MAILING ADDRESS (Street)	FAX 808-528-2629	
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(City)	(State)	(Zip Code)
HONOLULU	HAWAII	96813

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Agriculture	✓ Education	√ Human Services	Science, Technology & Economic Development
Communications & Public Utilities	Government Operation & Finance	Intergovernmental Relations, International Affairs	 ▼ Tourism & Recreation
Consumer Protection & Commerce	✓ Hawaiian Affairs	√ Labor & Employment	▼ Transportation
Culture, Arts, Historic Preservation	✓ Health	✓ Planning, Land & Water Use Management	Other: (indicate below)
Ecology, Energy Environmental Protection	✓ Housing	✓ Public Safety & Corrections	

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.

1-28-13

(Date)

Blenn S. Ida

(Signature of Lobbyist)

PART V AUTHORIZATION	TO LOBBY		
NAME	TITLE OF AUT	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
REGINALD CASTANARE	S BUSINESS	BUSINESS MANAGER / FINANCIAL SECRETARY	
NAME OF ORGANIZATION (if app	icable)	TELEPHONE	
PLUMBERS & FITTERS L	OCAL UNION 675	808-528-2629	
MAILING ADDRESS (Street)		FAX 808-528-2629	
1109 BETHEL STREET L	OWER LEVEL	EMAIL RCASTANARES@HILOCAL675.COM	
(City)	(State)	(Zip Code)	
HONOLULU	HAWAII	96813	
I hereby authorize the al	ove - named person to engage in lobbyi	ing activities on behalf of the undersigned.	
Reguld Casta	rales -		
	orizing Officer or Person Represented)	(Date)	

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